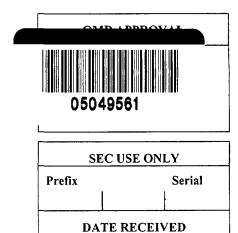
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION



Name of Offering (check if this is an	amendment and name has cha	nged, and indicate ch	ange.)	. #	2.110
Sale and issuance of Series A Preferred S	Stock and Common Stock issua	ble upon conversion	thereof.		31629
Sale and issuance of Convertible Securit	ies and Series A Preferred Stoo	k and Common Stock	issuable upon conversion	thereof.	
Filing Under (Check box(es) that apply):	☐ Rule 504	☐ Rule 505	Rule 506	☐ Section 4(6)	ULOE
Type of Filing:		New Filing		☐ Amendment	
	A. BA	SIC IDENTIFICAT	ION DATA		
1. Enter the information requested abo	out the issuer				
Name of Issuer (check if this is an an	nendment and name has chang	ed, and indicate chang	ge.)		
Akira Technologies Inc.					
Address of Executive Offices	(Number and	Street, City, State, Zi	Code) Telephone Nur	mber (Including Area Code	;)
38 Washington Street, Novato, Californi	a, 94947		(415) 209-937		1 1/1
Address of Principal Business Operation (if different from Executive Offices)	s (Number and Street, City, St	ate, Zip Code)	Telephone Nu	mber (Including Area Code	
Same as above.	7	DRACESSI	Same as above	STATE OF	IVED W
Brief Description of Business Software publishing for wireless applica	tions.	100 n 7 901	15	e Rail >>	1 2005).
Type of Business Organization	\	APM TO ELECT			L
corporation	☐ limited partnership, alre	ady formed MSON	į	other (please specif	(y):
☐ business trust	☐ limited partnership, to b	e formANCIA	a		(C/E)
Actual or Estimated Date of Incorporation	on or Organization:	<u>Month</u> August	<u>Year</u> 2000		☐ Estimated
Jurisdiction of Incorporation or Organiza	- '	Postal Service abbre or other foreign jurisc			DE

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid •MB control number.

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A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last Jennings, Joseph	name first, if individual)				
Business or Res	idence Address (Number and	Street, City, State, Zip Code) treet, Novato, California, 9494	7		
Check Boxes that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	☒ Director	General and/or Managing Partner
Full Name (Last Rempell, Steven	name first, if individual) H.				
	idence Address (Number and Sologies, Inc., 38 Washington S	Street, City, State, Zip Code) treet, Novato, California, 9494	7		
Check Boxes that Apply:	☐ Promoter	🗷 Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner
Kubal, Larry	name first, if individual)				
	idence Address (Number and S intures, 101 University Avenue	Street, City, State, Zip Code) e, 4 th Floor, Palo Alto, California	a, 94301		
Check Boxes that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Entities affiliate			eld by, Labrador Ventures V-B, l	L.P.	
	idence Address (Number and Sentures, 101 University Avenue	Street, City, State, Zip Code) e, 4 th Floor, Palo Alto, California	a, 94301		
Check Boxes that Apply:	Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Entities affiliate			eld by, Strategic Value Fund II, I	P.	
	idence Address (Number and S Venture Capital, Inc., 101 Ca	Street, City, State, Zip Code) lifornia Street, Suite 2830, San	Francisco, California, 94111		
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Las	t name first, if individual)				
Business or Res	idence Address (Number and	Street, City, State, Zip Code)			
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Las	t name first, if individual)				
Business or Res	idence Address (Number and	Street, City, State, Zip Code)			
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Las	t name first, if individual)				
Business or Res	idence Address (Number and	Street, City, State, Zip Code)			

					В.	INFORM	ATION ABO	OUT OFFE	RING				
1.	Has the is	suer sold, or	does the issue	er intend to				_	under ULOF	 3.		Yes N	o_X_
2.	What is the	he minimum	investment th	at will be a	ccepted from	n any indivi	dual?				••••••	\$	N/A
3.	Does the	offering pern	nit joint owne	rship of a si	ngle unit?		••••••••••				•••••	Yes X N	o
4.	solicitation registered	on of purchast I with the SE	sers in conne	ction with s	sales of sec tates, list th	urities in th e name of th	e offering. ne broker or	If a person	to be listed	is an associate	ed person or	agent of a	emuneration for broker or dealer ersons of such a
N/A	A												
Ful	l Name (La	st name first,	, if individual)									
Bu	siness or Re	esidence Add	lress (Number	and Street,	City, State,	Zip Code)							
Na	me of Asso	ciated Broker	r or Dealer										
Sta	tes in Whic	h Person Lis	ted Has Solic	ited or Inten	ds to Solici	Purchasers				<u> </u>			
(Cl	neck "All S	tates" or chec	k individual	States)						• • • • • • • • • • • • • • • • • • • •			All States
[A]	L]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL	.]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[M]	[MN]	[MS]	[MO]
[M	T]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[R]		[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]
Fu	ll Name (La	ist name first	, if individual)									
Bu	siness or R	esidence Add	iress (Number	and Street,	City, State,	Zip Code)					-		nt = 101 * h
Na	me of Asso	ciated Broke	r or Dealer										
Sta	ites in Whic	h Person Lis	ted Has Solic	ited or Inten	ds to Solici	Purchasers							
										•••••			All States
` [A		[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[JD]
[IL		[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[M		[NE]	[NV]	(NH)	[NJ]	[NM]	. , [NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
ĮR		[SC]	[SD]	(TN)	(<i>T</i>	[UT]	[VT]	[VA]	. , [VA]	[WV]	[WI]	[WY]	[PR]
			, if individual	<u>·</u>	<u> </u>			<u> </u>		 	<u> </u>	<u> </u>	
Bu	siness or R	esidence Ado	iress (Numbe	r and Street,	City, State,	Zip Code)				*****			
Na	me of Asso	ciated Broke	r or Dealer							_			

[CT]

[ME]

[NY]

[VT]

[DE]

[MD]

[NC]

[VA]

[DC]

[MA]

[ND]

[VA]

[FL]

[MI]

[OH]

[WV]

..... All States

[HI]

[MS]

[OR]

[WY]

[ID]

[MO]

[PA]

[PR]

[GA]

[MN]

(OK)

[WI]

[AL]

[IL]

[MT]

[RI]

[AK]

[IN]

[NE]

[SC]

States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States).....

[AR]

[KS]

[NH]

[TN]

[CA]

[KY]

[NJ]

[TX]

[CO]

[LA]

[NM]

[UT]

[AZ]

[lA]

[NV]

[SD]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	transaction is an exchange offering, check this box \(\sigma\) and indicate in the columns below the amounts of the Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$2,061,619.64	\$2,061,619.64
	Common Preferred		
	Convertible Securities (including warrants)	\$14,999.94	\$ <u>-0-</u>
	Partnership Interests	\$	\$
	Other (Specify)	\$	\$
	Total	\$ 2,076,619.58	\$ 2,061,619.64
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number	Aggregate
		Investors	Dollar Amount of Purchases
	Accredited Investors	7	\$ 2,061,619.64
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
		Type of	Dollar Amount
		Security	Sold
	Type of Offering		
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	×	\$57,000.00
	Accounting Fees	0	\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (Identify)		\$
	Total	×	\$ 57,000.00

h Enter the difference between the aggregate offering price given in re		
in response to Part C – Question 4.a. This difference is the "adjusted	esponse to Part C - Question 1 and total expenses furnished 1 gross proceeds to the issuer"	\$ <u>2,004,619.64</u>
5. Indicate below the amount of the adjusted gross proceeds to the issuer use If the amount for any purpose is not known, furnish an estimate and of payments listed must equal the adjusted gross proceeds to the issuer set for the instance of the issuer set for the instance of the issuer set for the instance of the in	check the box to the left of the estimate. The total of the	Payment To
,	Directors, & Affiliates	Others
Salaries and fees	\$	□ s
Purchase of real estate		□ \$
Purchase, rental or leasing and installation of machinery and equipment		□ \$
Construction or leasing of plant buildings and facilities		□ \$
Acquisition of other businesses (including the value of securities involved in in exchange for the assets or securities of another issuer pursuant to a merger)		□ s
Repayment of indebtedness	, — — — — — — — — — — — — — — — — — — —	□ \$
Working capital	\$	x \$ 2,004,619.64
Other (specify):	11.\$	□ s
		□ \$
Column Totals		\$ 2,004,619.64
Total Payments Listed (column totals added)		
D. FED	DERAL SIGNATURE	
The issuer had duly caused this notice to be signed by the undersigned duly an undertaking by the issuer to furnish to the U.S. Securities and Exchange (non-accredited investor pursuant to paragraph (b)(2) of Rule 502.		
Issuer (Print or Type)	Signatura	r
and the second s		Date
Akira Technologies Inc.		Date March 30, 2005
Name of Signer (Print or Type) Joseph W. Jennings	Title of Signer (Print or Type) President	
Name of Signer (Print or Type)		

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)